

110. A method for treating a mammalian patient who has a defect in the wall of a blood vessel that has a lumen and a wall, said method comprising the steps of:

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- A. providing a first catheter that has a lumen extending therethrough, a second catheter that has a lumen extending therethrough, a third catheter that has a lumen extending therethrough and an intravascular member that is disposed within the lumen of the third catheter while in a collapsed configuration of a first diameter, said intravascular member being subsequently advanceable out of the lumen of the third catheter whereupon the intravascular member will transition to expanded configuration of a second diameter;
 - B. placing the first catheter at a first position within the patient's vasculature;
 - C. advancing the second catheter through the lumen of the first catheter and to a second position within the patient's vasculature;
 - D. advancing the third catheter through the lumen of the second catheter to a third position within the patient's vasculature adjacent the vessel wall defect;
 - E. while the first, second and third catheters are in their respective first, second and third positions, advancing the intravascular member out of the lumen of the third catheter such that the intravascular member assumes its radially expanded configuration and engages the wall of the blood vessel so as to be held in substantially fixed position within the vessel lumen adjacent to the vessel wall defect and so that it provides a blood flow channel to permit blood to flow past the intravascular member when it is positioned in the blood vessel;
 - F. providing an embolus member sized to fit within the vessel wall defect; and,
 - G. positioning the embolus member within the vessel wall defect such that the intravascular member retains the embolus member within the vessel wall defect.

D2 112. A method according to Claim 110 wherein Step G is performed after Step E.

113. A method according to Claim 112 wherein Step G comprises:

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- i positioning a delivery catheter having a distal end within the intravascular member after it has been radially expanded in Step E;
 - ii causing the distal end of the delivery catheter to advance through a portion of the intravascular member and into the vessel wall defect;
 - iii delivering the embolus member out of the distal end of the delivery catheter and into the vessel wall defect; and,
 - iv removing the delivery catheter, leaving the embolus member within the vessel wall defect with the intravascular member preventing the embolus member from escaping from the vessel wall defect into the lumen of the blood vessel.

115. A method according to Claim 110 wherein the vessel wall defect is an aneurysm and wherein Step G comprises positioning the embolus member within the aneurysm.

D3 116. A method according to Claim 115 wherein the aneurysm is a wide mouthed aneurysm and wherein Step G comprises delivering the embolus member through the mouth of the aneurysm and into the aneurysm sac.

D4 118. A method according to Claim 110 wherein the embolic member delivered in Step G comprises a thrombogenic member.

REMARKS

By the foregoing amendment, Applicant has voluntarily cancelled all but one series of method claims, thereby substantially decreasing the number of claims pending and the